

**OFFICE OF THE FEDERAL DEFENDER
EASTERN DISTRICT OF CALIFORNIA
801 I STREET, 3rd FLOOR
SACRAMENTO, CALIFORNIA 95814
(916) 498-5700 Fax: (916) 498-5710**

*Daniel J. Broderick
Federal Defender*

*Linda Harter
Chief Assistant Defender*

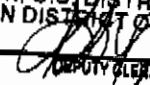
June 15, 2007

Mr. Mark J. Reichel
Attorney at Law
555 Capitol Mall, 6th Floor, #600
Sacramento, CA 95814

Re: **U.S. v. Michael Egan**
Cr.S-03-0471-DFL

FILED

JUN 15 2007

CLERK, U.S. DISTRICT COURT
EASTERN DISTRICT OF CALIFORNIA
BY  DEPUTY CLERK

Dear Mr. Reichel:

This will confirm your appointment as counsel by the Honorable Kimberly J. Mueller, U.S. Magistrate Judge, to represent the above-named defendant. You are attorney of record until such time as you are relieved or other action is taken to appoint a different attorney.

Enclosed is CJA 20 form, your Order of Appointment and Voucher for services rendered. Also enclosed is an instruction sheet discussing the use of the forms, together with sample forms for reporting court time. This will also provide a uniformity in the way attorneys report their time and services rendered.

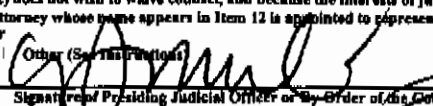
If we may be of any further assistance regarding the processing of the enclosed form, preparation of form CJA 21 for expert services, or in reference to any other matter pertaining to this case, please feel free to call upon us at any time.

Very truly yours,


CYNTHIA L. COMPTON
CJA Panel Administrator

:clc
Enclosures

cc: Clerk's Office

1. CIR./DIST./DIV. CODE CAE		2. PERSON REPRESENTED Egan, Michael		3. COURT NUMBER Page 2 of 2																																																																																																																																																																									
3. MAG. DKT./DEF. NUMBER		4. DIST. DKT./DEF. NUMBER 2:03-000471-001		5. APPEALS DKT./DEF. NUMBER																																																																																																																																																																									
7. IN CASE/MATTER OF (Case Name) U.S. v. Egan		8. PAYMENT CATEGORY Felony		9. TYPE PERSON REPRESENTED Adult Defendant																																																																																																																																																																									
10. REPRESENTATION TYPE (See Instructions) Other																																																																																																																																																																													
11. OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section) If more than one offense, list (up to five) major offenses charged, according to severity of offense. 1) 18 1956-4999.F -- MONEY LAUNDERING - FRAUD, OTHER																																																																																																																																																																													
12. ATTORNEY'S NAME (First Name, M.I., Last Name, including any suffix) AND MAILING ADDRESS Reichel, Mark J. 555 Capitol Mall 6th Floor, #600 Sacramento CA 95814 Telephone Number: (916) 548-7398			13. COURT ORDER <input checked="" type="checkbox"/> O Appointing Counsel <input type="checkbox"/> C Co-Counsel <input type="checkbox"/> F Subs For Federal Defender <input type="checkbox"/> R Subs For Retained Attorney <input type="checkbox"/> P Subs For Panel Attorney <input type="checkbox"/> Y Standby Counsel Prior Attorney's Name: _____ Appointment Date: _____ Because the above-named person represented has testified under oath or has otherwise satisfied this court that he or she (1) is financially unable to employ counsel and (2) does not wish to waive counsel, and because the interests of justice so require, the attorney whose name appears in Item 12 is appointed to represent this person in this case, or <input type="checkbox"/> Other (See this section) Signature of Presiding Judicial Officer or By-Order of the Court:  Date of Order: 06/11/2007 Repayment or partial repayment ordered from the person represented for this service at time of appointment. <input type="checkbox"/> YES <input type="checkbox"/> NO																																																																																																																																																																										
14. NAME AND MAILING ADDRESS OF LAW FIRM (only provide per instructions)																																																																																																																																																																													
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